



JCA-UST-011

Compliance Inspection

LUST

NO LUST

Sampling Activities Related to a Site Investigation Plan, Corrective Action Plan or Confirmatory Sampling

Inspection date: _____ **EQB employee who performs the inspection:** _____ **UST - 2 -** -

OBJECTIVES

1. Observe the implementation of health and safety measures during field activities, including security control in place. Verify that the Health and Safety Plan is carried out in accordance with the EQB's UST Permanent Closure Guide during all field activities, daily meetings to discuss safety measures, use of personal protective equipment and demarcation of the work area for the protection of the employee and the public in general.
2. Verify that all elements of the EQB's UST Permanent Closure Guide are properly implemented.
3. Verify that quality control and certainty (QA/QC) protocols, including equipment decontamination, sampling, frequency of quality control sampling, water quality for the blanks, and the calibration of the field instruments are duly implemented.
4. Verify that the data generated from the field activities and the sampling activities are valid scientifically and legally defensible.
5. Verify that the Sop's used for sampling and decontaminating equipment are correctly implemented.
6. Observe the field activities to identify potential errors related to sampling and sending samples including: sampling design, sampling methodology, sample heterogeneity, management and custody of the sample (s).
7. Identify the need to implement corrective action.

INSTRUCTIONS:

1. Inspection photos should be attached to this report.
2. If the sampling points are different from the diagram, a sketch must be made on the corresponding sheet.
3. The EQB Technician is authorized to make decisions that facilitate the sampling work and that do not affect what is established in the Permanent Closure Guide. It is not authorized to make modifications or to intervene in the decisions that pertain to the petitioner and/or specialized personnel. In case of reasonable doubt you should contact your immediate supervisor and/or the WQA Manager.

GENERAL INFORMATION

1. Project's name:

2. Physical address:

3. No. UST:

4. Contractor:

(Name of the Company)

5. Project manager:

6. Name of the Inspector:

7. Scheduled Date Activity:

Start date

Finish date

Type of activity to be carried out	Special conditions during sampling	
<input type="checkbox"/> Installation of groundwater monitoring wells <input type="checkbox"/> Drilling tasting <input type="checkbox"/> Soil sampling <input type="checkbox"/> Sampling groundwater wells <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Weather conditions: <input type="checkbox"/> Sunny <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> other: _____ Temp: _____ <input type="checkbox"/> Obstacles present at the time of sampling: _____ <input type="checkbox"/> Access denied <input type="checkbox"/> Sampling personnel was not in the area <input type="checkbox"/> Lack of equipment and / or materials to perform sampling <input type="checkbox"/> Lack of documentation required by EQB to perform the sampling activities <input type="checkbox"/> Dangerous conditions in the area: _____ <input type="checkbox"/> Other: _____ It was necessary to cancel the sampling due to the situation indicated <input type="checkbox"/> Yes <input type="checkbox"/> No Explain: _____ _____ _____ Work resumed? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain: _____ _____ _____ _____	
Personnel in the project		
Name	Agency / Company	Position

Required documentation	YES	NO*	N/A
Copy of the letter of authorization for the works to be carried out			
* Why?			
Access permission duly signed			
* Why?			
Field notebook			
* Why?			
Appropriate chain of custody sheets.			
No. Custody sheets (squential):			
* Why?			
Notebook or calibration sheet of field instruments			
* Why?			
Health and Safety	YES	NO*	N/A
Health and Safety Officer in the project:			
Does the corresponding talk on health and safety protocols was made to all personnel? (Annex 7 of the Permanent Closure Guide)			
* Why?			
Did each person who works in the area or who visits the area beyond the cleaning/security zone sign the knowledge and safety plan sheet? (Annex 2 of the Permanent Closure Guide)			
* Why?			
Did each person who works in the area or who visits the area signed the visiting sheet? (Annex 3 of the Permanent Closure Guide)			
* Why?			
Is the use of personal protective equipment in accordance with the levels of protection established in the Permanent Closure Guide?			
* Why?			
Exposure information according to OSHA placed in a visible place?			
* Why?			
The work areas are demarcated with signs or something visible for:			
<input type="checkbox"/> Clean area <input type="checkbox"/> Decontamination zone <input type="checkbox"/> Exclusion zone			
* Why?			
Is the list of contacts and emergency numbers available? (Annex 4 of the Permanent Closure Guide)			
* Why?			
Is the emergency equipment accessible and listed according to Annex 5 of the Permanent Closure Guide?			
* Why?			
Was there an accident during the sampling work?			
* Why?			
Was Annex 6 of the Permanent Closure Guide completed to report that accident?			
* Why?			
Was the traffic control adequate and as established in the Permanent Closure Guide?			
* Why?			

Before taking samples	YES	NO*	N/A
The location of the tastings or groundwater monitoring wells, are demarcated and are in accordance with the authorization of the approved works? (Indicate it in the sampling point diagram)			
* Why?			
Before taking samples from groundwater monitoring wells, were the wells purged?			
* Why?			
The readings of temperature, specific conductivity and pH of the water purged from the wells; were duly documented?			
How are the conditions of the cooler? <input type="checkbox"/> Filtration <input type="checkbox"/> Badly sealed <input type="checkbox"/> Dirty <input type="checkbox"/> In good condition <input type="checkbox"/> With enough ice <input type="checkbox"/> Contains a thermometer at 4oC ± 2oC in a bottle with water <input type="checkbox"/> Others, which:			
QA / QC samples are present? Field Blank <input type="checkbox"/> Yes <input type="checkbox"/> No (One for each day of sampling and by matrix)** Trip Blank <input type="checkbox"/> Yes <input type="checkbox"/> No (One per sampling day and per cooler)*** Equipment Blank <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> (N/A if are disposable or dedicated equipment) ** It must be opened during the process of taking one of the sampling points for the volatiles and closing immediately after finishing each sample at that point. *** It must remain inside the cooler and be delivered in conjunction with the samples collected, to the laboratory hired.			
What equipment was used to collect the water samples: <input type="checkbox"/> Teflon bailer <input type="checkbox"/> Peristaltic pump <input type="checkbox"/> Dipper <input type="checkbox"/> Stainless steel container <input type="checkbox"/> Other:			
What equipment was used to collect the soil samples: <input type="checkbox"/> Spatulas: <input type="checkbox"/> Stainless steel <input type="checkbox"/> "Carbon Steel" <input type="checkbox"/> Dedicated <input type="checkbox"/> No Dedicated <input type="checkbox"/> Disposable spatulas <input type="checkbox"/> Hand Auger <input type="checkbox"/> Drill or borer: Type or Brand _____ Type or brand of "liner" used _____			
During the drilling of borings	YES	NO*	N/A
Groundwater was found? ID Boring Depth reached _____ _____ _____ _____ _____			
Was groundwater samples taken for tracking? If it is affirmative, document in the Table of Field Data - Water Matrix and describe the appearance of the groundwater sample (color, odor, presence of product).			
Of the borings made, was one developed or will it be developed as an groundwater monitoring well? ID Boring: _____, _____, _____, _____, _____			
Was tracked soil obtained from the perforations by instrument (PID) to establish the existence of vapor concentrations of Volatile Organic Compounds (VOC)?			
* Why?			
Was the equipment (PID) properly calibrated? Was the calibration document verified?			
* Why?			

During the sampling			
SPECIAL CONSIDERATIONS: <ul style="list-style-type: none"> - Each sample must be deposited in the ice-cooler immediately the same was taken. - Duplicate samples should be taken simultaneously or immediately one after the other. - The samples have to be deposited in Ziploc plastic bags by parameter and by matrix. - The samples will be collected in a Grab (fortuitous) way. - After collecting the samples at each sampling point, they should be stored immediately in the cooler to be preserved at the regulatory temperature of $4^{\circ}\text{C} \pm 2^{\circ}\text{C}$. - Take field duplicates (1 duplicate for every 10 samples, 2 for every 20, 3 for every 30, and so on). - Do not rinse any of the bottles, especially those containing preservatives. - No bubbles or air spaces should be left in the container containing the sample in the case of VOCs. - The EQB technician cannot sign the Chain of Custody. 			
After sampling	YES	NO*	N/A
Do the sample containers have the labels ("labels") previously stuck, waterproof and filled in all their parts? (sample number, matrix, type of sample, preservative, collector signature, date, time, etc.)			
* Why?			
Check that the chain of custody information corresponds to the samples taken.			
* Why?			
Verify that the chain of custody is filled in all its parts as appropriate and signed.			
* Why?			
Check the temperature of the refrigerator before being sent to the laboratory.			
* Why?			
Was all the land removed from the excavations arranged in accordance with what was indicated in the Site Investigation Plan or Confirmatory Sampling?			
* Why?			

FIELD DATA

[illegible]

Use of Preservatives: *HCl, pH<2 ☐ Yes ☐ No **Na₂S₂O₃ ☐ Yes ☐ No \clubsuit HNO₃, pH<2 ☐ Yes ☐ No

Diagram or Sketch

Draw the area where the sampling was conducted and specify the location of the tastings and / or groundwater monitoring wells

☐ Sampling photographs were taken
(Attach them to this form or submit them in digital format)

☐ Sampling photographs were not taken
Why? _____

EQB Inspector Comments

- ☐ No deficiencies and/or observations were observed upon completion of the sampling inspection.
- ☐ The facility in reference was duly inspected by an inspector and the following are the observations of the inspector and recommended corrective action (s):

Additional observations and recommended action (s) (if applicable):

[illegible]

Name of the Inspector who performs the inspection:

Mold Letter

Signature

Inspection Date: _____